

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

03161.000991.2

First Named Inventor or Application Identifier

DUFournier ET AL.

Express Mail Label No.

EV095155265US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

1. ☐ Fee Transmittal Form  
(Submit an original, and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.

3. ☒ Specification Total Pages

4. ☒ Drawing(s) (35 USC 113) Total Sheets

5. ☐ Oath or Declaration Total Pages

a. ☐ Newly executed (original or copy)

b. ☒ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 17 completed)

i. ☐ **DELETION OF INVENTOR(S)**  
Signed Statement attached deleting  
inventor(s) named in the prior application, see  
37 CFR 1.63(d)(2) and 1.33(b).

6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer  
Program (Appendix)

8. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

a. ☐ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or

ii. ☐ paper

c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☒ Assignment Papers (cover sheet & document(s))

10. ☐ 37 CFR 3.73(b) Statement ☒ Revocation & Power  
of Attorney  
(when there is an assignee)

11. ☐ English Translation Document (if applicable)

12. ☒ Information Disclosure  
Statement (IDS)/PTO-1449 ☐ Copies of IDS  
Citations

13. ☒ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☒ Other: A Certified copy of the priority document has been  
filed parent application no. 09/418,283, now U.S. Patent No.  
6,397,670

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation

☒ Divisional

☐ Continuation-in-part (CIP) of prior application No. 10/023,185 which is a Div of  
09/418,283 filed 10/14/1999 patent number 6,397,670  
which is a Con of PCT/EP98/02251 filed 4/17/1998

Prior application information:

Examiner Adrienne C. Johnstone

Group/Art Unit: 1733

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is  
considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only  
be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

☒ Customer Number or Bar Code Label

05514

(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

NAME

John D. Murnane, Reg. No. 29,836  
Fitzpatrick, Cella, Harper & Scinto

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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	11-20 =		X \$ 18.00 =	\$
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	1 -3 =		X \$ 86.00 =	\$
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$290.00 =	\$
				BASIC FEE (37 CFR 1.16(a))	\$770.00
			Total of above Calculations = \$		
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
	TOTAL =				\$770

19. Small entity status

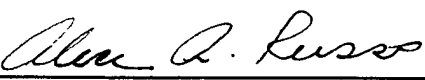
- a. ☐ A small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

20. ☒ A check in the amount of \$ 770 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☒ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Alicia A. Russo; Reg. No. 46,192
SIGNATURE	
DATE	February 12, 2004

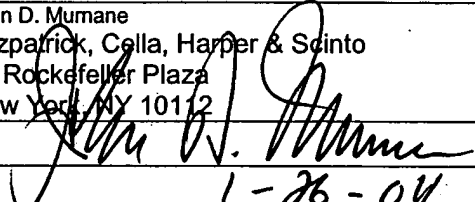
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/023,185
		Filing Date	12/18/2001
		First Named Inventor	Arnaud Dufournier
		Art Unit	1733
		Examiner Name	Adrienne C. Johnstone
Total Number of Pages in This Submission	3	Attorney Docket Number	03161.000991.1

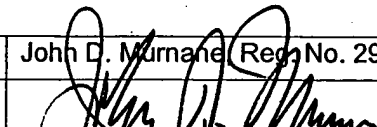
## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John D. Mumane Fitzpatrick, Cella, Harper & Scinto 30 Rockefeller Plaza New York, NY 10112
Signature	
Date	1-26-04

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	John D. Mumane Reg. No. 29,836		
Signature		Date	1-26-04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.